

## Provider Type 29 Home Health Agency Reimbursement Rates

Updated: 12-31-15

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**Note:**

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy.

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[Modifier List](#)

Proc Code	Description	Mod	Enhancement	Rate
A0160	NONER TRANSPORT CASE WORKER			0.28
A4311	CATHETER W/O BAG 2-WAY LATEX			14.84
A4312	CATH W/O BAG 2-WAY SILICONE			18.04
A4313	CATHETER W/BAG 3-WAY			18.52
A4314	CATH W/DRAINAGE 2-WAY LATEX			21.50
A4315	CATH W/DRAINAGE 2-WAY SILCNE			26.39
A4316	CATH W/DRAINAGE 3-WAY			28.40
A4320	IRRIGATION TRAY			5.33
A4322	IRRIGATION SYRINGE			3.04
A4327	FEM URINARY COLLECT DEV CUP			42.27
A4328	FEM URINARY COLLECT POUCH			10.45
A4330	STOOL COLLECTION POUCH			7.15
A4332	LUBE STERILE PACKET			0.12
A4333	URINARY CATH ANCHOR DEVICE			2.20
A4334	URINARY CATH LEG STRAP			4.93
A4338	INDWELLING CATHETER LATEX			12.26
A4340	INDWELLING CATHETER SPECIAL			26.99
A4344	CATH INDW FOLEY 2 WAY SILICN			16.02
A4346	CATH INDW FOLEY 3 WAY			19.25
A4354	CATH INSERTION TRAY W/BAG			11.80
A4355	BLADDER IRRIGATION TUBING			7.86
A4361	OSTOMY FACE PLATE			18.37
A4362	SOLID SKIN BARRIER			3.46
A4450	NON-WATERPROOF TAPE			0.09
A4452	WATERPROOF TAPE			0.36
A4455	ADHESIVE REMOVER PER OUNCE			1.22
A4481	TRACHEOSTOMA FILTER			0.38
A4556	ELECTRODES, PAIR			12.14

Proc Code	Description	Mod	Enhancement	Rate
A4619	FACE TENT			1.21
A4623	TRACHEOSTOMY INNER CANNULA			5.57
A4624	TRACHEAL SUCTION TUBE	NU		2.63
A4625	TRACH CARE KIT FOR NEW TRACH			6.58
A4626	TRACHEOSTOMY CLEANING BRUSH			2.78
A4628	OROPHARYNGEAL SUCTION CATH	NU		3.65
A4629	TRACHEOSTOMY CARE KIT			4.61
A6010	COLLAGEN BASED WOUND FILLER			30.96
A6011	COLLAGEN GEL/PASTE WOUND FIL			2.28
A6021	COLLAGEN DRESSING <=16 SQ IN			21.02
A6022	COLLAGEN DRSG>16<=48 SQ IN			21.02
A6023	COLLAGEN DRESSING >48 SQ IN			190.30
A6024	COLLAGEN DSG WOUND FILLER			6.19
A6154	WOUND POUCH EACH			14.36
A6196	ALGINATE DRESSING <=16 SQ IN			7.35
A6197	ALGINATE DRSG >16 <=48 SQ IN			16.44
A6199	ALGINATE DRSG WOUND FILLER			5.29
A6203	COMPOSITE DRSG <= 16 SQ IN			3.35
A6204	COMPOSITE DRSG >16<=48 SQ IN			6.23
A6207	CONTACT LAYER >16<= 48 SQ IN			7.34
A6209	FOAM DRSG <=16 SQ IN W/O BDR			7.48
A6210	FOAM DRG >16<=48 SQ IN W/O B			19.92
A6211	FOAM DRG > 48 SQ IN W/O BRDR			29.37
A6212	FOAM DRG <=16 SQ IN W/BORDER			9.70
A6214	FOAM DRG > 48 SQ IN W/BORDER			10.29
A6216	NON-STERILE GAUZE<=16 SQ IN			0.05
A6219	GAUZE <= 16 SQ IN W/BORDER			0.95
A6220	GAUZE >16 <=48 SQ IN W/BORDR			2.58
A6222	GAUZE <=16 IN NO W/SAL W/O B			2.13
A6223	GAUZE >16<=48 NO W/SAL W/O B			2.42
A6224	GAUZE > 48 IN NO W/SAL W/O B			3.61
A6229	GAUZE >16<=48 SQ IN WATR/SAL			3.61
A6231	HYDROGEL DSG<=16 SQ IN			4.68
A6232	HYDROGEL DSG>16<=48 SQ IN			6.88
A6233	HYDROGEL DRESSING >48 SQ IN			19.19
A6234	HYDROCOLLD DRG <=16 W/O BDR			6.54
A6235	HYDROCOLLD DRG >16<=48 W/O B			16.82
A6236	HYDROCOLLD DRG > 48 IN W/O B			27.25
A6237	HYDROCOLLD DRG <=16 IN W/BDR			7.91
A6238	HYDROCOLLD DRG >16<=48 W/BDR			22.79
A6240	HYDROCOLLD DRG FILLER PASTE			12.24
A6241	HYDROCOLLOID DRG FILLER DRY			2.57
A6242	HYDROGEL DRG <=16 IN W/O BDR			6.07
A6243	HYDROGEL DRG >16<=48 W/O BDR			12.31
A6244	HYDROGEL DRG >48 IN W/O BDR			39.28
A6245	HYDROGEL DRG <= 16 IN W/BDR			7.27

Proc Code	Description	Mod	Enhancement	Rate
A6246	HYDROGEL DRG >16<=48 IN W/B			9.92
A6247	HYDROGEL DRG > 48 SQ IN W/B			23.78
A6248	HYDROGEL DRSG GEL FILLER			16.24
A6251	ABSORPT DRG <=16 SQ IN W/O B			1.99
A6252	ABSORPT DRG >16 <=48 W/O BDR			3.25
A6253	ABSORPT DRG > 48 SQ IN W/O B			6.34
A6254	ABSORPT DRG <=16 SQ IN W/BDR			1.21
A6255	ABSORPT DRG >16<=48 IN W/BDR			3.03
A6257	TRANSPARENT FILM <= 16 SQ IN			1.53
A6258	TRANSPARENT FILM >16<=48 IN			4.30
A6259	TRANSPARENT FILM > 48 SQ IN			10.94
A6266	IMPREG GAUZE NO H2O/SAL/YARD			1.92
A6402	STERILE GAUZE <= 16 SQ IN			0.12
A6403	STERILE GAUZE>16 <= 48 SQ IN			0.43
A6410	STERILE EYE PAD			0.39
G0151	HHCP-SERV OF PT,EA 15 MIN		Rural Peds	27.50
G0151	HHCP-SERV OF PT,EA 15 MIN		Rural	16.36
G0151	HHCP-SERV OF PT,EA 15 MIN		Urban	14.03
G0151	HHCP-SERV OF PT,EA 15 MIN		Urban Peds	31.63
G0152	HHCP-SERV OF OT,EA 15 MIN		Rural Peds	27.50
G0152	HHCP-SERV OF OT,EA 15 MIN		Rural	16.36
G0152	HHCP-SERV OF OT,EA 15 MIN		Urban	14.03
G0152	HHCP-SERV OF OT,EA 15 MIN		Urban Peds	31.63
G0153	HHCP-SVS OF S/L PATH,EA 15MN		Rural Peds	27.50
G0153	HHCP-SVS OF S/L PATH,EA 15MN		Rural	16.36
G0153	HHCP-SVS OF S/L PATH,EA 15MN		Urban	14.03
G0153	HHCP-SVS OF S/L PATH,EA 15MN		Urban Peds	31.63
G0154	HHCP-SVS OF RN,EA 15 MIN	TV	Rural Peds	23.25
G0154	HHCP-SVS OF RN,EA 15 MIN	TV	Rural	23.25
G0154	HHCP-SVS OF RN,EA 15 MIN	TV	Urban	20.21
G0154	HHCP-SVS OF RN,EA 15 MIN	TV	Urban Peds	20.21
G0154	HHCP-SVS OF RN,EA 15 MIN		Rural Peds	23.25
G0154	HHCP-SVS OF RN,EA 15 MIN		Rural	23.25
G0154	HHCP-SVS OF RN,EA 15 MIN		Urban	20.21
G0154	HHCP-SVS OF RN,EA 15 MIN		Urban Peds	20.21
G0156	HHCP-SVS OF AIDE,EA 15 MIN	TV	Rural	11.27
G0156	HHCP-SVS OF AIDE,EA 15 MIN	TV	Urban	9.66
G0156	HHCP-SVS OF AIDE,EA 15 MIN		Rural	7.51
G0156	HHCP-SVS OF AIDE,EA 15 MIN		Urban	6.44
H1011	FAMILY ASSESSMENT	FP		28.44
S5180	HH RESPIRATORY THRPHY IN EVAL		Rural	65.45
S5180	HH RESPIRATORY THRPHY IN EVAL		Urban	56.10
S9122	HOME HEALTH AIDE OR CERTIFIE	TV	Rural	53.07
S9122	HOME HEALTH AIDE OR CERTIFIE	TV	Urban	45.48
S9122	HOME HEALTH AIDE OR CERTIFIE		Rural	35.38
S9122	HOME HEALTH AIDE OR CERTIFIE		Urban	30.32

Proc Code	Description	Mod	Enhancement	Rate
S9123	NURSING CARE IN HOME RN-PDN	TT	Urban Peds	36.75
S9123	NURSING CARE IN HOME RN-PDN	TT	Urban	27.55
S9123	NURSING CARE IN HOME RN-PDN	TT	Rural	32.14
S9123	NURSING CARE IN HOME RN-PDN	TT	Rural Peds	42.27
S9123	NURSING CARE IN HOME RN	TV	Rural Peds	64.28
S9123	NURSING CARE IN HOME RN	TV	Urban Peds	55.10
S9123	NURSING CARE IN HOME RN	TV	Urban	55.10
S9123	NURSING CARE IN HOME RN	TV	Rural	64.28
S9123	NURSING CARE IN HOME RN		Rural Peds	56.35
S9123	NURSING CARE IN HOME RN		Urban Peds	49.00
S9123	NURSING CARE IN HOME RN		Urban	36.73
S9123	NURSING CARE IN HOME RN		Rural	42.85
S9124	NURSING CARE IN HOME RN-PDN	TT	Urban Peds	29.25
S9124	NURSING CARE IN HOME RN-PDN	TT	Urban	20.46
S9124	NURSING CARE IN HOME RN-PDN	TT	Rural	23.88
S9124	NURSING CARE IN HOME RN-PDN	TT	Rural Peds	33.64
S9124	NURSING CARE, IN THE HOME; B	TV	Rural Peds	47.76
S9124	NURSING CARE, IN THE HOME; B	TV	Urban Peds	40.92
S9124	NURSING CARE, IN THE HOME; B	TV	Urban	47.76
S9124	NURSING CARE, IN THE HOME; B	TV	Rural	40.92
S9124	NURSING CARE, IN THE HOME; B		Rural Peds	44.85
S9124	NURSING CARE, IN THE HOME; B		Urban Peds	39.00
S9124	NURSING CARE, IN THE HOME; B		Urban	27.28
S9124	NURSING CARE, IN THE HOME; B		Rural	31.84
S9470	NUTRITIONAL COUNSELING, DIET		Rural	65.45
S9470	NUTRITIONAL COUNSELING, DIET		Urban	56.10
T1001	NURSING ASSESSMENT/EVALUATN	TV	Rural	23.25
T1001	NURSING ASSESSMENT/EVALUATN	TV	Urban	20.21
T1001	NURSING ASSESSMENT/EVALUATN		Rural	23.25
T1001	NURSING ASSESSMENT/EVALUATN		Urban	20.21
T1002	RN SERVICES UP TO 15 MINUTES	TV	Rural	23.25
T1002	RN SERVICES UP TO 15 MINUTES	TV	Urban	20.21
T1002	RN SERVICES UP TO 15 MINUTES		Rural	23.25
T1002	RN SERVICES UP TO 15 MINUTES		Urban	20.21
T1003	LPN/LVN SERVICES UP TO 15MIN	TV	Rural Peds	23.25
T1003	LPN/LVN SERVICES UP TO 15MIN	TV	Rural	23.25
T1003	LPN/LVN SERVICES UP TO 15MIN	TV	Urban	20.21
T1003	LPN/LVN SERVICES UP TO 15MIN	TV	Urban Peds	20.21
T1003	LPN/LVN SERVICES UP TO 15MIN		Rural Peds	23.25
T1003	LPN/LVN SERVICES UP TO 15MIN		Rural	23.25
T1003	LPN/LVN SERVICES UP TO 15MIN		Urban	20.21
T1003	LPN/LVN SERVICES UP TO 15MIN		Urban Peds	20.21
T1022	CONTRACTED SERVICES PER DAY		Rural	350.00
T1022	CONTRACTED SERVICES PER DAY		Urban	300.00







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